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Approved for use through 09/30/2000. OMB No. 2000-0604. PTO-9524 (6-98)
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE. A valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 51

Application Number	09/523,809
Filing Date	March 13, 2000
First Named Inventor	Michael P. Murphy
Group Art Unit	1633
Examiner Name	C. Stroup
Attorney Docket Number	68603.498CON

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Exhibits A-C of Declaration
28 References, Written Opinion, and
International Preliminary Examination Report

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name Hollie L. Baker, Reg. No. 31,321

Signature

Date April 12, 2001

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on the date April 12, 2001.

Typed or printed name Kenneth R. Maben

Signature

Date April 12, 2001

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

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PATENT & TRADEMARK OFFICE

TOTAL AMOUNT OF PAYMENT (\$ 625.00)

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
 Deposit Account Number 08-0219
 Deposit Account Name Hale and Dorr
- Charge Any Additional Fee Required
 Under 37 CFR 1.16 and 1.17
- Applicant claims small entity status.
 See 37 CFR 1.27
2. Payment Enclosed:
 Check Credit card Money Order Other

FEES CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
101	710	201	355	Utility filing fee
106	320	206	160	Design filing fee
107	490	207	245	Plant filing fee
108	710	208	355	Reissue filing fee
114	150	214	75	Provisional filing fee

Fee Paid**SUBTOTAL (1) (\$)****2. EXTRA CLAIM FEES**

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
		-20** =	X	=
		-3*** =	X	=

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

*or number previously paid, if greater; For Reissues, see above

Complete if Known

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FEES CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
105	130	205	65	Surcharge - late filing fee or oath
127	50	227	25	Surcharge - late provisional filing fee or cover sheet
139	130	136	130	Non-English specification
147	2,520	147	2,520	For filing a request for ex parte reexamination
112	920*	112	920*	Requesting publication of SIR prior to Examiner action
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action
115	110	215	55	Extension for reply within first month
116	390	216	195	Extension for reply within second month
117	890	217	445	Extension for reply within third month
118	1,390	218	689	Extension for reply within fourth month
128	1,890	228	945	Extension for reply within fifth month
119	310	219	155	Notice of Appeal
120	310	220	155	Filing a brief in support of an appeal
121	270	221	135	Request for oral hearing
138	1,510	138	1,510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive - unavoidable
141	1,240	241	620	Petition to revive - unintentional
142	1,240	242	620	Utility issue fee (or reissue)
143	440	243	220	Design issue fee
144	600	244	300	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	50	123	50	Processing fee under 37 CFR 1.17(q)
126	180	128	180	Submission of Information Disclosure Stmt
581	40	581	40	Recording each patent assignment per property (time number of properties)
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))
179	710	279	355	Request for Continued Examination (RCE)
169	900	169	900	Request for expedited examination of a design application
Other fee (specify)				

Fee Paid

445.00

180.00

SUBTOTAL (3) (\$ 625.00)

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Hollie L. Baker

Registration No.
(Attorney/Agent) 31,321Complete if applicable
Telephone (617) 526-6110

Date 4/12/2001

Signature Hollie L. Baker

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